Name in Full Edward Baynard

Certificate of Death

Died at Town Centerville County Town Anne MARYLAND

Date 1900 Month 1 Day 10 Age Y. About M. 68 yrs D.

Native of Md

Occupation Laborer

Male ~~White~~ Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ Number of children living 4

Husband ~~Wife~~ of Martha Baynard

Father's Name —

Mother's Name —

Cause of Death: Primary Chronic Nephritis 97 — How long sick 2 yrs

Immediate Cerebral Hemorrhage — Accident, Suicide, Homicide

Reported by [illegible] M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full: Mrs Susan Burriss

Certificate of Death

Died at: Town: near Centreville County: Queen Anne MARYLAND

Date 1900 Month 1 Day 15 Age Y. 72 M. 11 D. 15 Native of Md Occupation none

~~Male~~ ~~White~~ white ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living none

~~Husband~~ ~~Wife~~ Cousin of Wm Burriss

Father's Name

Mother's Name

Cause of Death: Primary Paterior Spinal Sclerosis 52 How long sick 5 or 6 yrs

Immediate Exhaustion from disease & Fractured Hip Accident, ~~Suicide, Homicide~~

Reported by J M Forkran M D

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Rachel Butler

Certificate of Death

Died at Near Town Centreville County Q. A. Co. MARYLAND

Date ~~1900~~ Month Day Jany 17 | Age Y. M. D. 27 — | Native of — | Occupation Housewife

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 0

~~Husband~~ Wife of Robert Butler

Father's Name — Mother's Name — 116

Cause of Death: Primary Pregnancy (I suspect only saw an hour before death) How long sick

Immediate Acute Uremia Accident, Suicide, Homicide

Reported by J. W. Bordley

Address Centreville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Mrs Fanny Chance

Certificate of Death

Died at Town: Winchester County: Queen Anne Co MARYLAND

Date 1900 Month: Jan Day: 25 | Age Y. 42 M. D. | Native of Md. | Occupation Housekeeper

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 1

~~Husband~~ Wife of John Freland

Father's Name John Chance | Mother's Name Mary Chance

Cause of Death: Primary Childbirth | How long sick 20 hours

Immediate Eclampsia | Accident, Suicide, Homicide

Reported by Chas Corkey MD

Address Queenstown Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full

Certificate of Death

John Richard Costin

Died at Town Barclay County Queen Anne MARYLAND

Date 19 00 Month 1 Day 24 Age Y. 33 M. D. Native of Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 1

Husband of Wife — Turner

Father's Name Jas. H. Costin Mother's Maiden Name

Cause of Death Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Centreville Record 1-27

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79899

Name in Full Bemah L. Fleming

Certificate of Death

Died ~~at~~ near Town Chester County Queen Anne MARYLAND

Date 19 or Month 1 Day | Age Y. M. D. | Native of | Occupation

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name

Mother's Maiden Name

Cause of Death { Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Enterprise 1-24

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full | Certificate of Death

Mrs Frances Harris

Died at Town: Alms House County: Queen Annes MARYLAND

Date 1890 Month: Jany Day: 20th | Age Y. 77 M. D. | Native of 2 A. Co | Occupation Pauper

Male / Female | White / Colored | Married / Single | Widow / Widower | Divorced / Number of children living

Husband / Wife of: No History

Father's Name | Mother's Name 141

Cause of Death: Primary: Old age | How long sick

Immediate | Accident, Suicide, Homicide

Reported by: J A Holton M D

Address: Centreville 2 A. Co Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, F5568

Name in Full

Certificate of Death

Not named

Died at Town Caltrus County Queen Anne MARYLAND

Date ~~189~~ 1900 Month Jan Day 14 | Age Y. — M. — D. 3 | Native of Q A Co. | Occupation —

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of ~~children~~ ~~living~~

Husband of — — — —

Wife

Father's Name Edw D Leiby

Mother's Name Gertrude White

Cause of Death

Primary Premature Birth 138

Immediate —

How long sick —

~~Accident, Suicide, Homicide~~

Reported by W. Frank Harris

Address Chestertown Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full Miss Violetta Mitchell

Certificate of Death

Died at Town Centreville County Queen Anne's MARYLAND

Date 1900 Month Jany Day 22 Age Y. 62 M. — D. Native of Md Occupation Lady

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ of

~~Wife~~

Father's Name R.H.B. Mitchell Mother's Name 59

Cause of Death Primary Arterio Sclerosis How long sick 2 years

Immediate Cerebral hemorrhage Accident, Suicide, Homicide

Reported by Jas. Bradley

Address Centreville, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068

Name in Full Solomon Price

Certificate of Death

Died at Town Centreville County Q. A. Co. MARYLAND

Date 1900 Month 1 Day 1.5 | Age Y. 62 M. D. | Native of Md. | ~~Occupation~~

Male ~~Female~~ | ~~White~~ Colored | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of Wife Susie Price

Father's Name — Mother's Name —

Cause of Death: Primary Age 141 | How long sick 6 months

Immediate General Debility | ~~Accident, Suicide, Homicide~~

Reported by Dawson & Whiteley

Address Centreville Queenanne Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65168

Was no Doctor

Information from -
Wm H. Reed
Centreville
Md

Name in Full — Certificate of Death

Nathaniel P Sewell

Died at Town: Church Hill County: Queen Annes — MARYLAND

Date 1901 Month: 1 Day: 6 | Age Y. 60 M. 11 D. 8 | Native of Md | Occupation Miller

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower ~~Divorced~~ | Number of children living ———

~~Husband~~ Wife of Sallie R. Sewell, 252

Father's Name Wm Sewell | Mother's Name Hester Sewell

Cause of Death — Primary: Cancer of throat — How long sick 1 year

Immediate: Hemorrhage

Accident, Suicide, Homicide

Reported by J R Brown

Address undertaker Church Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Mrs Annie R. Sparks

Certificate of Death

Died at: Centreville (Town) Queen Anne (County) MARYLAND

Date 1900 Month 1 Day 5 | Age Y. 54 M. 5 D. — | Native of Md | Occupation none

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 3

~~Husband~~ of Wife widow Kent Sparks

Father's Name — Mother's Name —

Cause of Death: Primary Consumption 22a | How long sick 15 yrs

Immediate Exhaustion | Accident, Suicide, Homicide

Reported by J M Dorman MD

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

George Stafford

Died at Town Sudbrooville County Queen Anne MARYLAND

Date 1900 Month 1 Day 31 Age Y. 29 M. D. Native of Occupation Farmer

Male White ~~Married~~ Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband ~~of~~ Wife

Father's Name Eduard Stafford Mother's Name Annie Stafford

Cause of Death Primary 22 f How long sick 8 months

Immediate Tuberculosis Accident, Suicide, Homicide

Reported by Foster Sudbr MD. Ave

Address Sudbrooville Md (No License)

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Jullie Stewart

Certificate of Death

Died at Town Near Church Hill County Queen Ames Md MARYLAND

Date ~~189~~ 1900 Month 1 Day 5 Age Y. 20 M. 5 D. 1 Native of Md Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ Number of children living —

~~Husband~~ ~~Wife~~ of

Father's Name Chas H Stewart Mother's Name Mollie Stewart

Cause of Death Primary Consumption 22a How long sick 18 mos

Immediate Accident, Suicide, ~~Homicide~~

Reported by J K Brown

Address Undertaker Church Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full: Sadie B. Stowman

Certificate of Death

Died at: Town: near Centreville County: Q. A. MARYLAND

Date: 1900 Month: 1 Day: 2 Age: Y. 1 M. 11 D. Native of: Md Occupation: Nursing

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband / Wife of ——

Father's Name: Geo H Stowman

Mother's Name: Sara A Dawkins

Cause of Death: Primary: Pneumonia 72 How long sick: 5 days

Immediate

Accident, Suicide, Homicide

Reported by

Address

J M Corkran M.D.
Centreville

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full

George Tolson

Certificate of Death

Died at Kent Island (Town) Queen Anne's (County) MARYLAND

Date 1900 Month Jan. Day 21 | Age Y. 1 M. — D. 4 | Native of Md. | Occupation —

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

Father's Name Charles B. Tolson | Mother's Name Sadie Jones

Cause of Death — Primary Marasmus & | How long sick about 2 mo's

Immediate Exhaustion | ~~Accident, Suicide, Homicide~~

Reported by C. Percy Keech, M. D.

Address Kent Island Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 74668

Name in Full Unnamed

Certificate of Death

Died at Town near Star County Queen Anne MARYLAND

Date 1900 Month Jan Day 12 Age ~~Y. M. D.~~ 5 minutes Native of Md Occupation

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Palmer C Wilson Mother's Name Hester Ann Hicks

Cause of Death Primary Unknown 161 How long sick

Immediate ~~Accident, Suicide, Homicide~~

Reported by Walter H Fenby

Address Ruthsburg Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968